



PTO/SB/21 (08-00)
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TRANSMITTAL FORM

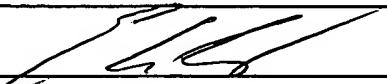
(to be used for all correspondence after initial filing)

		Application Number	10/043,796
		Filing Date	01/14/2002
		First Named Inventor	KIM
		Group Art Unit	3764
		Examiner Name	G.E. Richman
Total Number of Pages in This Submission		Attorney Docket Number	Kim-1

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
Filing of issue fee with formal drawings and PTOL-85b		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	LaMorte & Associates
Signature	
Date	07/29/2005

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class
mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

07/29/2005

Typed or printed name	Eric A. LaMorte		
Signature		Date	07/29/2005

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FEET TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1030)

Complete if Known

Application Number	10/043,796
Filing Date	01/14/2002
First Named Inventor	Kim
Examiner Name	G.E. Richman
Art Unit	3764
Attorney Docket No.	KIM-1

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None

 Deposit Account:

Deposit Account Number 50-1954
Deposit Account Name Lamorte & Associates

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 790	2001 395	Utility filing fee			
1002 350	2002 175	Design filing fee			
1003 550	2003 275	Plant filing fee			
1004 790	2004 395	Reissue filing fee			
1005 160	2005 80	Provisional filing fee			
SUBTOTAL (1) (\$)					

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X =	
Multiple Dependent	- 3** =	X =	

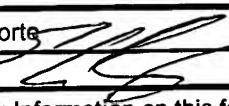
Large Entity	Small Entity	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 88	2201 44	Independent claims in excess of 3
1203 300	2203 150	Multiple dependent claim, if not paid
1204 88	2204 44	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath			
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet			
1053 130	1053 130	Non-English specification			
1812 2,520	1812 2,520	For filing a request for ex parte reexamination			
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action			
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action			
1251 110	2251 55	Extension for reply within first month			
1252 430	2252 215	Extension for reply within second month			
1253 980	2253 490	Extension for reply within third month			
1254 1,530	2254 765	Extension for reply within fourth month			
1255 2,080	2255 1,040	Extension for reply within fifth month			
1401 340	2401 170	Notice of Appeal			
1402 340	2402 170	Filing a brief in support of an appeal			
1403 300	2403 150	Request for oral hearing			
1451 1,510	1451 1,510	Petition to institute a public use proceeding			
1452 110	2452 55	Petition to revive - unavoidable			
1453 1,370	2453 685	Petition to revive - unintentional			
1501 1,370	2501 685	Utility issue fee (or reissue)			700
1502 490	2502 245	Design issue fee			
1503 660	2503 330	Plant issue fee			
1460 130	1460 130	Petitions to the Commissioner			
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)			
1806 180	1806 180	Submission of Information Disclosure Stmt			
8021 40	8021 40	Recording each patent assignment per property (times number of properties)			
1809 790	2809 395	Filing a submission after final rejection (37 CFR 1.129(a))			
1810 790	2810 395	For each additional invention to be examined (37 CFR 1.129(b))			
1801 790	2801 395	Request for Continued Examination (RCE)			
1802 900	1802 900	Request for expedited examination of a design application			
Other fee (specify) <input type="text"/>		Pub fee and 5 copies			330
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) (\$)					1030

(Complete if applicable)

SUBMITTED BY	
Name (Print/Type)	Eric LaMorte 
Signature	

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:

KIM

Art Unit: 3764

Serial No.: 10/043,796

Filing Date: 01/14/2002

: Examiner: G. E. Richman

For: EXERCISE DEVICE AND METHOD :

: July 29, 2005

X

Box ISSUE FEE

Commissioner of Patents and Trademarks

I hereby certify that this correspondence and/or fee is being deposited with the United States Postal Service as First Class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Alexandria, Mail Stop Issue Fee in accordance with 37 C.F.R. §1.8, on this day.

(Date of Deposit) 07/29/05

(Signature and Date)  7/29/05

LETTER TO OFFICIAL DRAFTSMAN

Sir:

Enclosed please find four (4) sheets of formal drawing, Figures 1-5, to be entered in the above-noted application. The enclosed formal drawings are being filed as required in the Notice of Allowability dated April 29, 2005 and submitted concurrently with the Issue Fee.

If there are any outstanding matters concerning the application, the Draftsman is invited to call the applicant's attorney at (215) 321-6772.

Respectfully Submitted,


Eric A. LaMorte
Reg. No. 34,653
Attorney For Applicant